## SERIAL NO. **MULTIPLE DEPENDENT CLAIM** FILING DATE FEE CALCULATION SHEET APPLICANT(S) (FOR USE WITH FORM PTO-875) CLAIMS AFTER 2nd AMENDMENT AFTER 1st AMENDMENT AS FILED DEP. IND. DEP. IND. DEP. IND. DEP. DEP. 1. 57. ·23 88. TOTAL TOTAL IND. TOTAL \* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

PORM PTO-1350 (REV. 3-78)

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